

Practitioner's Docket No. 1142-001**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: James E. Selis

Application No.: 10/631,204

Filed: 07/31/2003

For: BIOPSY DEVICES AND METHODS

Group No.: 3731

Examiner: Tyson, Melanie Ruano

Mail Stop RCE**Commissioner for Patents****P.O. Box 1450****Alexandria, VA 22313-1450****REQUEST FOR CONTINUED EXAMINATION (RCE)
(37 C.F.R. § 1.114)**

1. Applicant hereby requests continued examination, in accordance with 37 C.F.R. § 1.114, for the above identified application.

TIME REQUEST IS BEING MADE

2. This request is being submitted:
 - i. After Payment of the issue fee and with a Petition to Withdraw from Issue

ENCLOSURES

3. Enclosed herewith are:

Petition Under (37 C.F.R. §1.183) Question Not Specifically Provided for or, in the Alternative, Petition Under (37 C.F.R. §1.313(c)) Withdrawal from Issue – Issue Fee Paid:

Supplemental Information Disclosure Statement, which Applicant respectfully requests consideration.

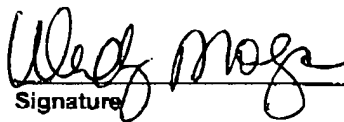
CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. section 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being faxed to Karen Creesy at (571) 273-0025:

Date:

11-25-09

Signature

Wendy Morgan

(type or print name of person certifying)

FEE FOR REQUEST (37 C.F.R. § 1.17(e)).

4. This application is on behalf of a small entity.

Continued Prosecution Request Fee: 405.00

FEE FOR CLAIMS

5. The fee for claims (37 C.F.R. § 1.16(b)-(d)) has been calculated as shown below:

	(Col.1)	(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA					RATE	ADDIT. FEE	
TOTAL	20	–	20	=	0	x	\$	52.00	=	\$ 0.00
INDEP.	1	–	3	=	0	x	\$	220.00	=	\$ 0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM								+		
								\$ 390.00	=	\$ 0.00
								TOTAL ADDIT. FEE	\$	0.00

No additional fee for claims is required.

TOTAL FEE(S) DUE

6. The total fee(s) due is/are:

Continued Prosecution Fee (Section 1.17(e)) \$405.00

Total Fee(s) Due: \$405.00

PAYMENT OF FEE(S) DUE

8. Please pay the fee(s) for this continued examination application as follows:

Please charge Deposit Account No. 50-1097 in the amount of \$405.00.

Please charge any required additional fee(s) to Deposit Account 50-1097.

INVENTORSHIP

9. This application as amended names as inventors the same inventors as previously designated for the claims.

Date: Nov. 25, 2009

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